

TESTING ROUTINE OUTCOME MEASUREMENT IN OUTPATIENT CARE IN SATAKUNTA HOSPITAL DISTRICT, FINLAND

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Background: Health-Related Quality of Life has been considered suitable for outcome measurements in chronic illnesses.

Methods: Feasibility of collecting routinely data on health gains during treatment was assessed during a outpatient service development project in Satakunta hospital district, Finland. Patients contacting the outpatient services for the first time were asked to fill in scales during their first visit. The scales were sent by mail three months, one year and two years after the first visit. The instruments used were AUDIT-5, BDI-21 and 15D. 15D is a scale developed for purposes of estimating QALY's in health economic research. It has been widely used in Finland in general population and patient populations including psychiatric patients. Previous studies have defined a population standard (0.9402 out of a score of 1) for 15D assessments and a universal cut-point (change of 0.03) for clinically significant change.

Results: The use of routine-based outcome measurement has been well feasible in outpatient care. So far 949 patients have undergone the first measurement point, 590 the second assessment point and 312 the third assessment point. The data collection is still on-going and numbers of responses at later intervals are likely to increase. At the first assessment the mean 15D score was 0.7616, at three months 0.7857 and at one year 0.7995. Scores increased especially concerning anxiety and depression, but considerably less regarding sleep.

Conclusion: Routine measurement of health gains is feasible within the context of public psychiatric services. Measurement implied also need for development of insomnia treatment.